REQUEST	FOR JUDICIAL INTERV	For Court Clerk Use Only:			
	UCS-840 (3/2011)		IAS Entry Date		
/gmrs	COURT, COUNTY OF				
Index No.	Batal I I		Judge Assigned		
Index No:	Date Index Issued:				
CAPTION: Enter the o	complete case caption. Do not use et al or et ano.	. If more space is	RJI Date		
required, at	ttach a caption rider sheet.				
		Plaintiff(s)/Petitioner(s)	I		
-against-					
I					
			Potential Wall		
			Defendant(s)/Respondent(s		
NATURE OF ACTION C	OR PROCEEDING: Check ONE bo	x only and specify where in	dicated.		
MATRIMONIAL		COMMERCIAL			
Contested Uncontested		Contract	luding corporations, partnerships, LLCs, etc.)		
_	al actions where the parties have children under	1 %	surer is a party, except arbitration)		
	and attach the MATRIMONIAL RJI Addendum.	1 =	s, negotiable instruments)		
TORTS		Other Commercial:	-		
Asbestos			(specify)		
O Breast Implant		NOTE: For Comme	ercial Division assignment requests [22 NYCRR §		
Environmental:			e and attach the COMMERCIAL DIV RJI Addendum.		
	(specify)	REAL PROPERTY:	How many properties does the application include?		
Medical, Dental, or Podiate	ric Malpractice	O Condemnation			
Motor Vehicle		O Foreclosure			
Products Liability:	(specify)	Property Address:	Address City State Tim		
Other Negligence:	(apacity)		Address City State Zip Sure actions involving a one- to four-family, owner-		
	(specify)		al property, or an owner-occupied condominium,		
Other Professional Malpra	ictice:	complete and attach	n the FORECLOSURE RJI Addendum.		
	(specify)	Tax Certiorari - Secti	ion: Block: Lot:		
Other Tort:		Other Real Property:			
	(specify)		(specify)		
OTHER MATTERS		SPECIAL PROCEED			
Emergency Medical Treatr	n/Dissolution [see NOTE under Commercial]	1 <del>-</del>	oitration) [see NOTE under Commercial]		
O Habeas Corpus	nent	CPLR Article 78 (Box	ay or Officer)		
O Local Court Appeal		C Election Law	on deads 1 and		
Mechanic's Lien		MHL Article 9.60 (Ke	endra's Law) Offender Confinement-Initial)		
Name Change		1 =	Offender Confinement-Review)		
Pistol Permit Revocation H	learing	MHL Article 81 (Gua	•		
Sale or Finance of Religiou		Other Mental Hygien			
Other:		_	(specify)		
	(specify)	Other Special Proced			
			(specify)		
STATUS OF ACTION O			ND enter additional information where indicated.		
dee e cummons and a control to	YES				
•	t or summons w/notice been filed?	O If yes, date filed:			
s this action/proceeding being	filed post-judgment?	If yes, judgment of	date:		

	URE OF JUDICIAL IN	ITERVEN	FION:	Check ONE	box only AND er	nter additional infon	nation where	e indicated.			
O	Infant's Compromise										
Ğ	Note of Issue and/or Cert		less								
Ŏ	Notice of Medical, Dental,	or Podiatric									
Notice of Motion			Relief Sought: Return Date:								
Notice of Petition			Relief Sought: Return Date:								
Ō	Order to Show Cause		Relief Sought:								
Ŏ	Other Ex Parte Application	n	Relief Sought:								
Ō	Poor Person Application										
Ō	Request for Preliminary C										
O	Residential Mortgage Fore	eclosure Sett	lement Confere	nce							
Ō	•										
<u> </u>	Other (specify):										
			ted actions. For Matrimonial actions, include any related criminal and/or Family Court cases.  space is required, complete and attach the RJI Addendum. If none, leave blank.						ses.		
		Index/Cas		ed, complete a		Judge (if assigned)		Relationship to Instant Case			
Case	Case Title Index		se No.	Court	Jui	Juuge (II assigned)		Relationship to instant case			
		]									
		-		<del>                                     </del>							
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	17 - 1 194			1							
PAR			ed, complete and			ess, phone number	and a mail	nddunn in #	Attomose" enece		
18 60	Parties:	iout an atton	Attorneys:	rep box AND	enter party addr	ess, prione number	and e-mail	adoress in a	Attorneys space.		
Un-	List parties in caption order	er and						- Issue			
Rep	indicate party role(s) (e.g.	defendant;	Provide name, firm name, business address, phone number and e-mail address of all attorneys that have appeared in the case.				Joined	Insurance Carrier(s):			
	3rd-party plaintiff).	address of all	attorneys that i	nave appeared II	the case.		(Y/N):				
İ	Last Name	Last Name		Last Name First Name				OYES			
	<b>_</b>										
	First Name Primary Role:				Firm Name						
			Stran	Street Address City State Zip							
	Secondary Role (if any):		Stree	t Address	U	ty State	Zip	Оио			
			Phone	į.	Fax	e-m	ail				
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	First Name Primary Role:		Firm Name								
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	IN THIS ACTION OR P			NGS, NUK H	IMO A KEWUE	SI FOR JUDICIA	AL IN I ERV	ENTION	REVIOUSLY BEEN		
	TING ACTION OAT										
	Dated:			_			016117				
							SIGNATU	IKE			
ATTORNEY REGISTRATION NUMBER					PRINT OR TYPE NAME						

**Print Form**